



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Serial No.: 09/930,711

Filed: August 15, 2001

**For: METHODS AND SYSTEMS FOR WATER
DETECTION IN A DISHWASHER**

:
: Art Unit: 1746
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: Examiner: S. Chaudhry
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CERTIFICATE OF MAILING BY EXPRESS MAIL TO
THE COMMISSIONER OF PATENTS AND TRADEMARKS

Date of Mailing: **January 26, 2004**

I certify that the attached including:

- RCE Transmittal (1 pg.), in duplicate
- Amendment Transmittal Form (3 pgs.), in duplicate
- Amendment After Final Office Action (7 pgs.), in response to Office Action dated August 25, 2003 and made final, and Advisory Action dated December 9, 2003
- Return post card

is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. §1.10 on the date indicated above in an envelope addressed to Commissioner for Patents, Mail Stop RCE, P.O. Box 1450, Alexandria VA 22313-1450.


Michael Tersillo, Reg. No. 42,180
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Kiesler et al.

Serial No.: 09/930,711

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For: METHODS AND SYSTEMS FOR WATER
DETECTION IN A DISHWASHER

Art Unit: 1746

Examiner: S. Chaudhry

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL

1. Transmitted herewith is:
Amendment After Final Office Action (7 pgs.), in response to Office Action dated August 25, 2003, and made final, and Advisory Action dated December 9, 2003
RCE Transmittal Form (1 pg.), in duplicate
Amendment Transmittal Form (3 pgs.), in duplicate
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STATUS

2. Applicant
☐ claims small entity status.
☒ is other than a small entity.

**CERTIFICATE OF MAILING BY EXPRESS MAIL TO
THE COMMISSIONER FOR PATENTS**

Express Mail No. EV331421032US

Date: January 26, 2004

I hereby certify that the documents listed above are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. §1.10 on the date indicated above in an envelope addressed to Commissioner for Patents, Mail Stop RCE, P.O. Box 1450, Alexandria, VA 22313-1450.

Michael Szabo

Michael Tersillo, Reg. No. 42,180

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(complete (a) or (b), as applicable)

- (a) ☒ Applicant petitions for an extension of time under 37 C.F.R. 1.136
(Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)

Extension for response within:	Other than small entity Fee	Small entity Fee (if applicable)
<input type="checkbox"/> first month	\$ 110.00	\$ 55.00
<input checked="" type="checkbox"/> second month	\$ 420.00	\$ 210.00
<input type="checkbox"/> third month	\$ 950.00	\$ 475.00
<input type="checkbox"/> fourth month	\$1,480.00	\$ 740.00
<input type="checkbox"/> fifth month	\$2,010.00	\$1,005.00
	Fee Due	\$ 420.00

If an additional extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)

- ☐ An extension of _____ months has already been secured. The fee paid therefor \$_____ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$ _____.

OR

- (b) ☐ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)	SMALL ENTITY		OTHER THAN SMALL ENTITY
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	ADDITIONAL RATE FEE	OR	ADDITIONAL RATE FEE
TOTAL		MINUS		=	x \$9 = \$		x \$18 = \$
INDEP.		MINUS		=	x \$43 = \$		x \$86 = \$
— FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+ \$145 = \$		+ \$290 = \$
					TOTAL ADDITIONAL FEE \$	OR	TOTAL ADDITIONAL FEE \$

(a) ☒ No additional fee for Claims is required

OR

(b) ☐ Total additional fee for claims required \$

FEE PAYMENT

5. _____ Attached is a check in the sum of \$_____

☒ Charge Deposit Account No. 01-2384 the sum of **\$420.00**.
A duplicate of this transmittal is attached.

FEE DEFICIENCY

6. ☒ If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.

AND/OR

☒ If any additional fee for claims is required, charge Deposit Account No. 01-2384.

7. ☐ Other:



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